

PROVIDER INQUIRER

March 1st, 2007

www.michigan.gov/mdch

MDCH Outpatient Prospective Payment System (OPPS)/APC Project Update

Featured Articles

Page 1:

- MDCH Outpatient Prospective Payment System (OPPS) / APC Project Update

Page 2:

- Documentation EZ Link

Page 3:

- Continued: Documentation EZ Link
- Edit 936 Common Errors

Page 4:

- NPI Countdown Column

Page 5:

- Continued: NPI Countdown Column
- The CHAMPS Corner: One Year Later...

MDCH continues to work towards the 4/1/07 implementation of the OPPS for currently enrolled Provider Type 40s (Outpatient Hospitals, CORE/ORFs, Rehab Agencies, Freestanding Dialysis Centers and Hospital Owned Ambulance).

MSA Policy Bulletin 06-47 was issued on 7/1/06 with detailed information regarding the OPPS with subsequent policy bulletins released for Hospital Owned Ambulance Services (MSA 06-82 issued 12/8/06), Observation Care Services (MSA 07-07 issued 2/1/07) and OPPS Financial/Reimbursement (MSA 07-12 issued 2/16/07).

Detailed OPPS/ APC project information can be found on the MDCH Website - <https://www.michigan.gov/mdch> Click on Providers >>> Information for Medicaid Providers >>> Outpatient Prospective Payment System (OPPS) Project.

MDCH has incorporated the OPPS changes into the Business to Business (B2B) environment for testing and Pilot Project purposes. Providers are encouraged to submit at least one Business to Business (B2B) test file prior to the 4/1/07 implementation date to review billing, editing and reimbursement changes under the OPPS. Detailed B2B test instructions can be found on the OPPS Project website.

For questions or more information regarding MDCH's OPPS project, please submit an e-mail to the APCProject@michigan.gov mailbox.

PROVIDER INQUIRER

March 1st, 2007

www.michigan.gov/mdch

Documentation EZ Link

Typical in states with a high volume of Medicaid patients – the claim adjudication process can be high cost and labor intensive for both providers and the state. The current process has multiple manual touch points required to pull information from patient's charts, copy, stamp, mail, receive and route claims attachments requests and responses. This manual process has a tendency to increase the time and cost to closure per claim.

To create more efficiency for MDCH and providers, MDCH is announcing an ambitious and innovative Pilot program called "Documentation EZ Link." Providers will be able to submit claim attachments electronically through an online and no-cost, secure web portal or by fax. The benefits are plenty:

- Decrease claim resolution cycle time so that:
 - your cash flow is improved,
 - and patients will have an early and clear picture of their balance due.
- Eliminate printing and mailing costs which will:
 - drive down your cost of operations,
 - and the manual burden of processing mail.
- Create an audit trail history of what claims information was sent to whom and when which will:
 - help track the history of a claim,
 - identify where a claim stands in the adjudication cycle,
 - and will help staff fill in for one another – equipped with the tools to bring themselves up to speed quickly with claim status.
- Make daily processes less redundant and time consuming.

"Documentation EZ Link" will first be available to providers in Livingston, Macomb, Monroe, Oakland, St. Clair, Washtenaw, and Wayne counties. Starting in mid-March, providers in these counties will be able to fax claim attachments to MDCH. Providers will benefit because they won't have to mail claim document to the MDCH, and with the speed of faxing, the claim resolution process will be shortened. In early May, providers in these counties will also be invited to submit the claim attachments online through a no-cost, secure, easy-to-use web portal – eventually eliminating the need for fax-based communications.

PROVIDER INQUIRER

March 1st, 2007

www.michigan.gov/mdch

A full training Pilot program will be announced in the coming weeks – so please visit the provider section of the MDCH web site at www.michigan.gov/medicaidproviders, then click on “Documentation EZ Link” under “Medicaid Billing & Reimbursement”.

Edit 936 Common Errors

Edit 936 is a common edit found on professional and institutional claims. The definition of Edit 936, the admission/readmission/transfer authorization number is missing, can occur for the following reasons:

1. The provider is billing for an elective admission into the hospital (indicated by an ‘N’ in Box 24I) and there is not an authorization number on the claim.
 - For professional hard copy claims the authorization number should go in Box 23.
 - For professional and institutional electronic claims the authorization number should go in Loop 2300, REF Qualifier G1.
2. If the beneficiary did not have Medicaid coverage at the time of admission, the remarks/comment section should indicate ‘Retroactive Eligibility’.
 - For professional hardcopy claims, this information should be entered in Box 19.
 - For professional and institutional electronic claims, this information should be entered in Loop 2300, Segment NTE, and Qualifier ADD.
3. If an emergency service is billed and it is coded as elective.
 - For professional hard copy claims Box 24I should contain a ‘Y’ for emergency.
 - For electronic claims the ‘Y’ should be entered in Loop 2400, Segment SV109.

If you are having problems with Edit 936, please be sure to check these common billing errors to ensure that the claim is being coded according to the guidelines stated.

For additional information please contact Provider Inquiry at 1-800-292-2550 or ProviderSupport@michigan.gov.

PROVIDER INQUIRER

March 1st, 2007

www.michigan.gov/mdch



NPI Countdown Column



Less Than 3 months remain before NPI implementation. Are you ready?

Medicaid is now accepting NPI's on Institutional, Professional and Dental Claims. Please make sure when submitting claims with NPI's to include your legacy Medicaid Provider ID number along with your NPI number so your claim can be properly adjudicated.

The new paper claim forms have been changed to accommodate the changes for NPI. Please note the dates listed below. MDCH will only accept the new paper versions on:

- March 1, 2007 - Dental claim form, ADA-2006
- April 1, 2007 - Professional claim form, CMS-1500
- May 23, 2007 - Institutional claim form, UB-04

NPI Collection Update:

The next step in Medicaid's NPI collection process for those providers that have not reported their NPI's is phone calls. Medicaid has started calling those providers that haven't reported their NPI's by the published deadline. To date Medicaid has collected 75 percent of the

NPI numbers for Medicaid Providers. Some providers have continued to voice problems with User Names and Passwords for the SSO NPI collection tool. If you are having those problems and holding back sending your NPI's because of that, log onto www.michigan.gov/mdch >>Providers >>National Provider Identifier >> Mass Collector and then follow the instructions on how to use the Mass Collector Spreadsheet . You can use the Mass Collector spreadsheet to enter you NPI's on without having to go through the SSO system and getting a User ID and password.

If you have not reported your NPI to Medicaid yet, do it today!

If you have not already applied for an NPI number, please do so soon. It is important that you report your NPI numbers to Medicaid as soon as possible. Without your NPI numbers on file, Medicaid may not be able to crosswalk your claims back to your Medicaid Provider ID number, which could cause a potential lapse in payment.

PROVIDER INQUIRER

March 1st, 2007

www.michigan.gov/mdch

You can apply for your NPI with NPPES online at <https://nppes.cms.hhs.gov/> or call toll free at 1-800-465-3203. You may also contact NPPES for NPI questions regarding the status of an application, forgotten or lost NPI numbers, lost NPI notification letters, trouble accessing NPPES, forgotten NPPES password/user

ID or if you need to request a NPI paper application.

Please continue to watch our website for frequent updates with NPI information. Any questions may be directed to the Provider Inquiry Unit at 1-800-292-2550 or you can email your NPI questions to npi@michigan.gov.



One Year Later...

March 28th is the one-year anniversary of the official commencement of the CHAMPS project. Then simply known as Medicaid Management Information System (MMIS), it has become much more. In addition to replacing the current MMIS the purpose has expanded to the incorporation of several satellite systems as well. The new CHAMPS system has evoked an examination of the Medicaid Program's structure and needs. The exercise has produced many questions and many solutions.

The year to come is sure to bring more challenges, more opportunities, and, most of all, more results. Unseen to providers, CHAMPS will begin bringing the new Document Management System online in late spring of 2007. Development and testing of other systems will soon follow.

MDCH appreciates the patience, dedication, and participation of all Medicaid Providers. Our collective reward will be the realization of an effective and efficient system that will reap benefits for a long time to come.